

<i>SERFF Tracking Number:</i>	<i>HART-125786101</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>Hartford Casualty Insurance Company, ...</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>FN.13.042.2008.01(R)</i>		
<i>TOI:</i>	<i>17.0 Other Liability - Claims Made/Occurrence</i>	<i>Sub-TOI:</i>	<i>17.0001 Commercial General Liability</i>
<i>Product Name:</i>	<i>'rule-Equipment Dealers Broadened Property Damage Coverage (FN042)</i>		
<i>Project Name/Number:</i>	<i>rule-Equipment Dealers Broadened PD Coverage/FN.13.042.2008.01(R_</i>		

## Filing at a Glance

Companies: Hartford Casualty Insurance Company, Hartford Insurance Company of the Midwest, Hartford Underwriters Insurance Company, Property and Casualty Insurance Company of Hartford, Twin City Fire Insurance Company, Hartford Accident and Indemnity Company, Hartford Fire Insurance Company

Product Name: 'rule-Equipment Dealers Broadened Property Damage Coverage (FN042)  
 SERFF Tr Num: HART-125786101 State: Arkansas

TOI: 17.0 Other Liability - Claims Made/Occurrence  
 SERFF Status: Closed State Tr Num: EFT \$50

Sub-TOI: 17.0001 Commercial General Liability Co Tr Num: FN.13.042.2008.01(R) State Status: Fees verified and received

Filing Type: Rule Co Status: Initial Filing  
 Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding  
 Disposition Date: 08/29/2008

Authors: Joyce Driscoll, Marilu Gonzalez, David Logan, Sima Nizami, Angela Isaac  
 Date Submitted: 08/27/2008

Effective Date Requested (New): 12/06/2008  
 Effective Date Requested (Renewal): 12/06/2008  
 Disposition Status: Approved  
 Effective Date (New):  
 Effective Date (Renewal):

State Filing Description:

## General Information

Project Name: rule-Equipment Dealers Broadened PD Coverage  
 Project Number: 'FN.13.042.2008.01(R\_  
 Reference Organization:  
 Reference Title:  
 Filing Status Changed: 08/29/2008  
 State Status Changed: 08/29/2008  
 Corresponding Filing Tracking Number:  
 Filing Description:

Status of Filing in Domicile: Not Filed  
 Domicile Status Comments:  
 Reference Number:  
 Advisory Org. Circular:  
 Deemer Date:

SERFF Tracking Number: HART-125786101 State: Arkansas  
First Filing Company: Hartford Casualty Insurance Company, ... State Tracking Number: EFT \$50  
Company Tracking Number: FN.13.042.2008.01(R)  
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To include damage to an insured's product arising out of a defect in the insured's product that existed when it was transferred to another; and  
By amending the Damage To Your Work exclusions by only excluding "property damage" to that particular part of "your work", not all of "your work".

Please see Explanatory Memorandum for more detailed information.

## Company and Contact

### Filing Contact Information

David Logan, Filing Analyst david.logan@thehartford.com  
690 Asylum Avenue (860) 547-3792 [Phone]  
Hartford, CT 06115 (860) 547-5941[FAX]

### Filing Company Information

Hartford Casualty Insurance Company	CoCode: 29424	State of Domicile: Indiana
Hartford Plaza	Group Code: 91	Company Type: Property
Hartford, CT 06115	Group Name:	State ID Number:
(860) 547-5000 ext. [Phone]	FEIN Number: 06-0294398	

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Hartford Insurance Company of the Midwest	CoCode: 37478	State of Domicile: Indiana
Hartford Plaza	Group Code: 91	Company Type: Property
Hartford, CT 06115	Group Name:	State ID Number:
(860) 547-5000 ext. [Phone]	FEIN Number: 06-1008026	

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Hartford Underwriters Insurance Company	CoCode: 30104	State of Domicile: Connecticut
Hartford Plaza	Group Code: 91	Company Type: Property
Hartford, CT 06115	Group Name:	State ID Number:
(860) 547-5000 ext. [Phone]	FEIN Number: 06-1222527	

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Property and Casualty Insurance Company of Hartford	CoCode: 34690	State of Domicile: Indiana
Hartford Plaza	Group Code: 91	Company Type: Property
Hartford, CT 06115	Group Name:	State ID Number:

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(860) 547-5000 ext. [Phone]

FEIN Number: 06-1276326

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Twin City Fire Insurance Company

CoCode: 29459

State of Domicile: Indiana

Hartford Plaza

Group Code: 91

Company Type: Property

Hartford, CT 06115

Group Name:

State ID Number:

(860) 547-5000 ext. [Phone]

FEIN Number: 06-0732738

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Hartford Accident and Indemnity Company

CoCode: 22357

State of Domicile: Connecticut

690 Asylum Ave

Group Code: 91

Company Type: Property

Hartford, CT 06115

Group Name:

State ID Number:

(860) 547-5000 ext. [Phone]

FEIN Number: 06-0383030

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Hartford Fire Insurance Company

CoCode: 19682

State of Domicile: Connecticut

Hartford Plaza

Group Code: 91

Company Type:

690 Asylum Avenue

Group Name:

State ID Number:

Hartford, CT 06115

FEIN Number: 06-0383750

(860) 547-5000 ext. [Phone]

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SERFF Tracking Number: HART-125786101 State: Arkansas  
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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: \$50.00 group fee AR  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Hartford Casualty Insurance Company	\$50.00	08/27/2008	22160607
Hartford Insurance Company of the Midwest	\$0.00	08/27/2008	
Hartford Underwriters Insurance Company	\$0.00	08/27/2008	
Property and Casualty Insurance Company of Hartford	\$0.00	08/27/2008	
Twin City Fire Insurance Company	\$0.00	08/27/2008	
Hartford Accident and Indemnity Company	\$0.00	08/27/2008	
Hartford Fire Insurance Company	\$0.00	08/27/2008	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	08/29/2008	08/29/2008

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## Disposition

Disposition Date: 08/29/2008

Effective Date (New):

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

### Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Explanatory Memorandum	Approved	Yes
Rate	EQUIPMENT DEALERS BROADENED PROPERTY DAMAGE COVERAGE (FN 042)	Approved	Yes

<i>SERFF Tracking Number:</i>	<i>HART-125786101</i>	<i>State:</i>	<i>Arkansas</i>
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## Rate Information

Rate data does NOT apply to filing.



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Project Name/Number: rule-Equipment Dealers Broadened PD Coverage/FN.13.042.2008.01(R\_

## Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Approved	EQUIPMENT DEALERS BROADENED PROPERTY DAMAGE COVERAGE (FN 042)	GL-S-042-ST- 0808.doc	New	Rule Page.pdf

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**EQUIPMENT DEALERS BROADENED PROPERTY DAMAGE COVERAGE (FN 042)**

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**A. COVERAGE**

Form **HS 04 10** – Amendment Of Coverage – Damage To Your Product And Damage To Your Work

This optional endorsement was developed as a coverage enhancement for the operations described by ISO classification Machinery Or Equipment Dealers - Construction Or Industrial - Mobile Type (15060).

When form HS 04 10 is attached to a policy, coverage is expanded in two ways:

- To include damage to an insured's product arising out of a defect in the insured's product that existed when it was transferred to another; and
- By amending the Damage To Your Work exclusion by only excluding "property damage" to *that particular part* of "your work", not all of "your work".

Coverage provided by **HS 04 10** is subject to the limits of insurance that apply to Coverage A – Bodily Injury and Property Damage Liability.

**B. RULES****1. Rating**

- To determine the charge at each applicable deductible, multiply the Products-Completed operations premium for class 15060 at policy inception by the appropriate percentage in the following table:

Deductible	Premium Charge
\$500	5%
\$1000	4%
\$2500	2%

- Compare the premium developed to the minimum premium in paragraph **3.** of this rule. Use the higher of the two premiums for the final premium for this endorsement.

**2. Deductibles**

A deductible of \$500 applies to each occurrence. Separate deductibles apply to both coverages on the endorsement (Damage To Your Product and Damage To Your Work); both deductibles will always be the same amount. Optional deductibles of \$1,000 and \$2,500 are also available.

**3. Minimum Premium**

\$50 minimum premium for form **HS 04 10**.

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## Supporting Document Schedules

<b>Satisfied -Name:</b>	Explanatory Memorandum	<b>Review Status:</b>	
<b>Comments:</b>		Approved	08/29/2008
<b>Attachment:</b>			
EM rule.pdf			

**EXPLANATORY MEMORANDUM –RULE  
COMMERCIAL GENERAL LIABILITY  
FILING FN.13.042.2008.01(r)**

Introduction

With this filing we are submitting rules related to a new optional form which will be available to equipment dealers. For risks that meet our underwriting standards, coverage may be expanded:

- To include damage to an insured's product arising out of a defect in the insured's product that existed when it was transferred to another; and
- By amending the Damage To Your Work exclusion by only excluding "property damage" to *that particular part* of "your work", not all of "your work".

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Coverage Impact

Expands coverage under the Commercial General Liability Coverage Form.

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Related Filing

Refer to the companion Form filing.

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Explanation of Changes

This rule filing is for the following form:

Form Number	Form Title
HS 04 10 08 08	Amendment Of Coverage – Damage To Your Product and Damage To Your Work

For risks that meet our underwriting eligibility, we are adding rules that permit the use of this optional form with risks classified using ISO classification 15060, Machinery Or Equipment Dealers – Construction Or Industrial – Mobile Type.

Premium Impact

The use of this form results in an additional premium, which will be part of the overall premium consideration made for classification 15080, an (a) rated classification. It will be percentage charge, based on the deductible selected. This charge was developed based on the judgment of underwriters who are familiar with these types of insureds and work with agents and brokers specializing in this type of business. Refer to enclosed Rule Page FN 042.

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*Timothy R. Finnegan*

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